

Corrected

MULTIPLE-DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/586 486

FILING DATE

APPLICANT(S)

CLAIMS

AS FILED	AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		AS FILED	AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
	1		1			51			
2			1		52				
3			1		53				
4			1		54				
5			1		55				
6			1		56				
7			1		57				
8			1		58				
9			1		59				
10			1		60				
11			1		61				
12			1		62				
13			1		63				
14			1		64				
15					65				
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43					93				
44					94				
45					95				
46					96				
47					97				
48					98				
49					99				
50					100				
TOTAL IND.			4						
TOTAL DEP.			10						
TOTAL CLAIMS			14						